POSIT___:	INITIALS	ID. NO.	DATE
FEE DETERMINATION	M m		03-13-01
O.I.P.E. CLASSIFIER		21	4/2/01
FORMALITY REVIEW	SI	1021	04/26/01
RESPONSE FORMALITY REVIEW	TA8	1110	8-15-01

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
— (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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